Effective on 12/08/2004.				Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).								
FEE TRANSMITTAL				Application Number 10/584,65 Filing Date 12/24/200				
For FY 2009				Named Inventor				
				111011111111111111111111111111111111111		asimer Jacyna		
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 3754				
TOTAL AMOUNT OF PAYMENT (\$) 940				Attorney Docket 0388 - 06		1892		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments								
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card								
information and authorization on PTO-2038.								
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES								
Small Entity Small Entity Small Entity								
Application Type	Fee (\$) Fee		<u>Fee (\$)</u>	<u>Fee (\$)</u>	Fee (\$)	Fees F	<u>'aid (\$)</u>	
Utility	330 82	540	270	220	110			
Design	220 110	100	50	140	70			
Plant	220 110	330	165	170	85			
Reissue	330 165	540	270	650	325			
Provisional	220 110	0	0	0	0			
							Small Entity	
Fee Description Fach claim over 20 (including Reissues) 52							Fee (\$) 26	
Each stain over 20 (methods)							110	
Each independent claim over 3 (including Reissues) Multiple dependent claims 220							195	
		tra Claims	Fee (\$)	Fee Paid (\$)			ependent Claims	
18 -	=	0 x	52 =	= 0		Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims - 3	or HP Ex	tra Claims	Fee (\$)	Fee Paid (\$)				
1		0 x	220 =	=0				
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under								
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof.								
See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
- 100 = /50 = (round up to a whole number) x =								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): Request for Continued Examination; 1-mo Extension of Time 810; 130								
SUBMITTED BY								
Signature Registration No. (Attorney/Agent) 25,363 Telephone 41							12-471-8815	
Name (Print/Type) Paul M. Reznick Date						Date Febr	te February 8, 2010	